

Auckland City Council's district plan further submission form



in support of or in opposition to a submission

Please print clearly	For office use only
Full name:	Submission No.
Your organisation: (if applicable)	
Contact person: (if applicable)	
Address for correspondence:	
Phone: (business) _____ (home) _____	
E-mail address: _____	

The particulars of the submission(s) I/we support or oppose, and the reasons for my/our support or opposition are set out on the reverse of this form. Please set out particulars in the table provided on the reverse of this form, and continue on additional pages if necessary.

This is a further submission on the following plan modification name and number:

Please tick the section of the district plan your submission relates to:

- 1999 Operative Isthmus Section
- 1996 Operative Hauraki Gulf Islands Section
- 2006 Proposed Hauraki Gulf Islands Section
- 2004 Operative central Area Section

I/we wish to be heard at the hearing in respect of my/our further submission.

- Yes
- No

I/we would be prepared to present a joint case at a hearing with any others marking similar submissions.

- Yes
- No

Signed: _____ Date: _____

Important note

A copy of further submission must be served on the person(s) who made the original submission within five working days of sending your further submission to Auckland City Council.
The contact address of each submitter is available on request.

Further submission form

The particular part of the submission(s) I support and /or oppose are as follows:

Name of original submitter	Original submission number and part of submission	Add either of the following: <ul style="list-style-type: none">• allowed• disallowed	The reason for my support or opposition.

Note: This form may be used but is not essential, all of the details sought above should be noted in your submission.

Auckland City council, (Atten: City Planning), 1 Greys Avenue, Central Auckland.

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